FEE TRANSMITTAL

Complete if known	
Application Number: 09/852,709	
Filing Date: May 11, 2001	
First Named Inventor: Heiks	
Group Art Unit: 2874	
Examiner Name: Michael J. Stahl	

Total Amt. of Payment: (1)+(2)+(3)= **$812**	Attorney Docket Number: Shipley 03-10

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to:
   - [ ] Charge indicated fees
   - [X] Charge additional fees
   - [X] Credit overpayments

   to the account of DANN, DORFMAN, HERRELL & SKILLMAN

   Deposit Account Number ___04-1406___

2. Payment enclosed:

   Check in the amount of **$812**

FEE CALCULATION

1. FILING FEE

Fee Description	Fee
Utility filing fee	_____
Design filing fee	_____
Plant filing fee	_____
Reissue filing fee	_____
SUBTOTAL (1)	**$0**

2. Claims

	Paid		Extr			Fee
Total Claims	41	-28 =	13	x 18 =		234
Independent Claims	5	-3 =	2	x 84 =		168
Multiple Dependent (First presentation)						

SUBTOTAL (2) __$402__

FEE CALCULATION (continued)

ADDITIONAL FEES

Fee Description	Fee Paid
Surcharge-late filing fee or oath	_____
Surcharge - late provisional filing fee or cover sheet	_____
Extension for response within second month	410
Notice of Appeal	_____
Filing a brief in support of an appeal	_____
Request for oral hearing	_____
Petition to revive unavoidably abandoned appl.	_____
Petition to revive unintentionally abandoned appl.	_____
Issue fee	_____
Petitions to the Commissioner	_____
Petitions related to provisional applications	_____
Submission of Information Disclosure Stmt.	_____
Recording each patent assignment per property	_____
Other fee (specify)_____	_____
SUBTOTAL (3)	**$410**

Submitted By:

Typed or Printed Name ___Niels Haun___   Reg. Number __48,488__

Signature _____   Date __March 6, 2003__   Deposit Account User ID ___04-1406___

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